PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999											9 <u>5</u>	0608	7	
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE OF			OTHER THAN R SMALL ENTITY		
FOR			NUMBER FILED			NUMBER EXTRA			ATE	FEE		RATE	FEE	
ВА	SIC FEE									345.00	OR		690.00	
TO	TAL CLAIMS		13 / minus 20= · / /					X\$ 9=			OR	X\$18=	2106	
INDEPENDENT CLAIMS 3 = 10							X	39=		OR	X78=	180		
MULTIPLE DEPENDENT CLAIM PRESENT									30=		OR	+260=	•	
* If the difference in column 1 is less than zero, enter *0* in column 2								TOTAL		OR	TOTAL	25 Te		
CLAIMS AS AMENDED - PART II									/IAL	L.——	JON	OTHER		
(Column 1) (Column 2) (Column 3)								SA	IALL	ENTITY	OR	SMALL		
NTA		REM Al	AIMS AINING TER IDMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total		12	Minus	••	137	- 5	X	§ 9=		QЯ	X\$18=	90	
ME	Independent	$\overline{\cdot}$	16	Minus	••	<u> </u>	- 3	X	39=		OR	X78=	234	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								30=		OR	+260=	0	
()									TOTAL		00	TOTAL ADDIT, FEE	3900	
٦	51K/126	(Col	umn 1)		ı	Column 2)	(Column 3)	ADD	T. FEE			AUUII. FEE		
AMENDMENT 8	1	REM	AIMS IAINING FTER			HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL		RATE	ADDI; TIONAL	
	Total	AMEI	NDMENT	Minus	-	PAID FOR	. 7	H,	 \$ 9=	FEE		X\$48=	FEE	
	Independent	· /	ACT.	Minus	⊢	197	= ()	\vdash			OR	X78=	/	
₹	FIRST PRESE		Ľ	39=		OR	^/0=	1						
Г	·							Ŀ	30=		OR	+260=		
								ADD	TOTAL IT. FEE		ОВ	ADDIT. FEE		
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		REA	AIMS IAINING FTER NOMENT		,	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	P	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•		Minus			=	X	\$ 9=		OR	X\$18=		
量	Independent	Ŀ		Minus	·	**	3	L	39=		1	X78=		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								30=	 	OR		 	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										ОЯ	+260=		
! ••	If the entry in colu If the "Highest Nu "If the "Highest No	mber Pi	eviously P	aid For IN TH	IS S	PACE is less th	an 20, enter "20."	ADO	TOTAL IT. FEE		OR	ADDIT. FEE		
1	II die riighest Nu	mber Pre	eviously Pa	ad For (Total o	r inc	race is 1935 of dependent) is th	en 3, willer 3. e highest number i	ound i	n the ap	opropriate bo	in ci	olumn 1.		

Application or Docket Number